

## **South Dakota Board of Nursing**

South Dakota Department of Health 4305 S. Louise Avenue Suite 201; Sioux Falls, SD 57106-3115 (605) 362-2760; Fax: 362-2768; www.state.sd.us/doh/nursing

Medication Administration Training Program for Unlicensed Assistive Personnel Application for Re-Approval of Training Program

Medication administration may be delegated only to those individuals who have successfully completed a training program pursuant to ARSD 20:48:04 01:14. An application along with required documentation must be submitted to

the Board of Nursing for approval. Written rof all required documents. Send completed a Nursing; 4305 S. Louise Ave., Suite 201; Siou	otice of a application	pproval or denia and supporting	I of the application w documentation to:	vill be issu	ued upo	n receipt
Name of Institution: Chamberlain  Name of Primary Instructor: Linda  Address: 301 E. Kellam, P.O.  Phone Number: 605-234-446  E-mail Address of Faculty: Linda S. John	Box 1	SON, KN 19 Char Fax Number	nberlein, 2 er: 605-231	1D 5	132 79	5
Request re-approval using the following a records using the Enrolled Student Log form.     □ 2011 SD Community Mental Health Facilitie    □ Gauwitz Textbook - Administering Medication Mosby's Texbook for Medication Assistants,    □ Nebraska Health Care Association (2010) (I    □ We Care Online  2. List faculty and licensure information: Following Students	es (only approns: Pharm ons: Pharm Sorrentino	roved for agencies ce nacology for Health o & Remmert (2009	ertified through the Depar 1 <u>Careers</u> , Gauwitz (2019)	tment of So	cial Servi	ces)
clinical RN experience, and 2) attach a new Cu			entifying areas of teach			
RN FACULTY/INSTRUCTOR NAME(S)	State	Number	RN LICENSE Expiration Date	Verificati		
LinoAS. Johnson	50	RO13618	12/30/2013	(Complete	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1/2
Complete evaluation of the curriculum / progra     Standard	ım: <i>(Explai</i>	in 'No' responses on a	a separate sheet of paper	:)	Yes	No
Each person enrolled in your program had a	high school	ol diploma or the e	quivalent.		/ /	INO
<ol><li>Your program was no less than 16 classroor of 20 hours.</li></ol>	n hours an	d 4 hours clinical/la	aboratory instruction fo	or a total	X	
<ol> <li>Your program's faculty to student ratio did r</li> <li>Your program's faculty to student ratio did r</li> </ol>				etency	X	
validation.					X	
5. Each student's performance was documente 6. You maintain records using the Envolled Stu			checklist form.		X	
RN Faculty Signature: Truda Akroso			8-24-2012	i.	1.^	
This section to be completed by the South Da	kota Boa				<u>.</u>	
Date Application Received: 8/27/12			ent to Institution:	1/291	12	
- 6-14	2014	Application De	enied. Reason:			
Board Representative: STAND						5/16/12

South Dakota Board of Nursing Curriculum Content Application Form: Mosby's Textbook for Medication Assistants (Sorrentino, S. & Remmert, L. (2009), Mosby's Textbook for Medication Assistants, Mosby: St. Louis, MO.)

Agency/Facility Name: \ Chamberlain School Distrio

This form provides primary instructors a guide on how to teach the content of the Mosby curriculum with approximate time frames. Complete column 4 with the name of RN(s) responsible for teaching each content area. Submit completed form to BON with your Medication Administration Training Program Application. Self-study □ Other\_

Identify teaching method(s) you will use to teach content: X Lecture

2) An overview of the major categories of medications related to the body systems, including:  a. Cardiovascular; b. Endocrine; c. Gastrointestinal; d. Integumentary; e. Musculoskeletal; f. Nervous;	Unit Test (ARSD 20:4804.01:14 — Tests are developed for each unit in-curriculum, including a final test. A passing score of 85% is required on each unit test with an opportunity to retake each test one time. If a student fails on retake, additional instruction is required before further testing is allowed.)	1) General information relevant to the administration of medications, including:  a) Governmental regulations related to the practice of nursing, the administration of medication, and the storage, administration and recording of controlled substances: b) Ethical issues c) Terminology, abbreviations and symbols; d) Medication administration systems, e) Forms of medication; f) Procedures and routes of medication administration, g) Medication references available h) The role of unlicensed assistance personnel in administering medications f) The five rights of medication administration; right patient, right medication, right dose, right time, right route and f) Infection Control policies and procedures	1.Curriculum Requirements Pursuant to ARSD 20:48:04:01:15
2. Overview of major categories of medications related to the body systems.	Administer unit 1 test	1. General Information: Governmental regulations related to medication administration SD Specific Legal Requirements Ethical issues Terminology, abbreviations, and symbols Medication administration systems; Forms of medication: Procedures and routes of medication administration Medication references Role of UAP in administering medications Rights of medication administration; Medication Safety & Infection control	2. Content Outline
5.5 hrs	0.5 hr	7 hrs	3. Time Frame
		tehnson R	4. RN Instructor(s)
Content from Chapters in text: 5. Body Structure, Function 7. Life Span Considerations	Review questions provided in text may be used to develop test. Passing score of 85% required; may retake test once. (RN primary instructors are expected to maintain the Mosby Student Log Form for their students.)	Content from Chapters in text: 1: The Medication Assistant 2: Delegation 3: Ethics and Law 8: Drug Orders & Prescriptions 9: Medication Safety 6: Basic Pharmacology 9: Medication Safety 10: Orat, Sublingual, Buccal 11: Topical 12: Eye, Ear, Nose, Inhaled 13: Vaginal, Rectal	<ol> <li>Teaching Methodology Used May include: lecture, self-study, online, case study</li> </ol>

			Criteria Met: Yes No; reason denied:	SD BON Reviewer Use Only Date Application received:
		20 hrs		Required hours: 16 classroom instruction + 4 laboratory instruction 20 hours
RN instructor completes required Skills Performance Evaluation form for each student that passes tests. (Additional checklists may also be completed as desired.)	Linoa Johnsona	4 hrs	<ul> <li>Clinical/laboratory instruction provided with required RN faculty-to-student ratio of 1:8;</li> <li>Skills performance evaluation completed by RN with required 1:1 faculty-to-student ratio.</li> </ul>	4) Clinical or laboratory instruction for the purpose of demonstration of medication administration and evaluation of individual competence.  (ARSD 20:48:04.01:14 Faculty-to-student ratio cannot exceed 1:8 in clinical setting. A 1:1 ratio is required for skills performance evaluation.)
Review questions provided in text may be used to develop test. Passing score of 85% required; may retake test once.		0.5 hr	Administer comprehensive final test	Final Test (ARSD 20:4804.01:14)
Use applicable content from Chapters in text:  14. Nervous System 15. Mental Health 16. Seizure 16. Seizure 17. Pain 19. Hypertension 20. Dysrhythmias 21. Angina, PVD, Heart Faillure 22. Diuresis 23. Thrombo- embolic diseases 24. Respiratory diseases 25. Gastro- esophageal/ulcer s 26. Nausea, vomiting, constipation, diarrhea disease, vomiting, diarrhea diseases, thyroid disease, vomiting, diarrhea diseases, thyroid disease, vomiting, diarrhea diseases 27. Diuresis 28. Steroids / hormones 29. Men's & women's health 30. Urinary system disorders 31. Eye disorders 32. Cancer 33. Muscles & joints 34. Infections dietary diseases 35. Nutrition / herbal dietary		2 hrs	3. Additional instruction may include those categories of medications relevant to the employee's healthcare setting.	3) Additional instruction shall include those categories of medications relevant to the healthcare setting where the unlicensed person will be employed; and
Review questions provided in text may be used to develop test. Passing score of 85% required; may retake test once.		0.5 hr	Administer unit 2 test	Unit Test (ARSD 20:4804.01:14)

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03-1-2012